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(Printed from the Medical News of Dec. 8, 1877.)
A CASE OF SYPHILITIC APHASIA.

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M. H. A., an actor, aged thirty-seven, came under the writer's charge, in the City Hospital, February 14, 1877. He was represented by his friends, who brought him to the hospital, to be the subject of paralysis of the right side, with mental aberration. For some months he had suffered excruciatingly from pain in his left temple. He was entirely helpless from general debility added to the paralysis. He was greatly emaciated, and passed his fæces involuntarily. He had been confined to bed four months. His medical attendant had pronounced the case hopeless, and a fatal termination was daily expected.

A few questions developed plainly the patient's disordered intellectual condition. At times his memory of ideas seemed distinct, but all command of words was absent. At other times he seemed devoid of ideas as well as words. Sometimes he was conscious of using the wrong word, and corrected or attempted to correct himself, and again he used the wrong word without being aware of it. At times he spoke several sentences correctly in every particular, and at other times his mind wandered and he was evidently lunatic. In speaking he enunciated very deliberately, and his expression of countenance was one of intense effort, as if he was aware of his liability to make mistakes, and desired to avoid them. His face and tongue were free from all evidences of paralysis, and his eyes were bright and intelligent most of the time. The right leg was completely paralyzed; but the right arm, though the subject of locomotor ataxia, was as strong as the left. Its motions were without regularity; it flew about in various directions when he attempted to use it, and it was with great difficulty and uncertainty that he could put the hand where he wished to. Though a fair scholar, he could not write at this time, nor indeed for some time after the ataxia disappeared, which it did in

a few days. In reply to a question as to the locality of his pain, he replied, "Left temple;" and when told to put his hand on his left temple, he placed his left hand there; but when told to put his right hand on his left temple or knee, he put it on the right temple and knee.

The following questions and answers will convey an idea of the patient's condition: When asked his name, he gave his real name, although he had played under an assumed name nearly twenty years; and when asked his father's name, he stated the baptismal name correctly, but for the surname he gave the one by which he himself is known to the public. How old are you? "I will be forty-second; no, forty, forty, four hundred and four. O, pshaw!" You get that mixed. "Correct." You have played keno, I see. "Yes, but I never played but one game." How old did you say you were? "Forty-two years old" (which was not so). When were you married? "Married 14th of January. December 16th, 1814." When did you say you were married? "Said I was married January, 1662; December or January, 1862." Just now you said 1662. "Did not intend. Missed a word; that was all." Patient asked for a drink of spirits or beer. How will you take it? "I'll take it straight." How many drinks would you like to have? "I have drank—I have drank thirty-six since yesterday morning. Exactly." He had had none. When asked to repeat the Lord's prayer, he said, "Our Faler—Faler—Give it up." Although his mind was well stored with poetry, plays, and song, he could repeat none, notwithstanding strenuous effort on his part, even when they were repeated to him. Excelsior and the Psalm of Life he declared he knew well and used to enjoy, yet he could not repeat a single word of either. Asked to count twenty, he enumerated one, two, three, four, five, six, seven, eight, nine, ten, eleven, seven, three, and broke down. Told to call the letters, he said, A, B, C, D, E, three, four, five, so on till stopped. This he repeated several times, and was not aware of the error. In another

effort he proceeded aright to O, then said Len, U, V, Q, R, C, L—B, C, D, and desisted in despair, uttering an exclamation of annoyance. His name was again asked. He gave his real and adopted name, explained why he first took up the former, and told who he was called after. In reply to an inquiry as to his habits, he stated that he had been a sociable, free drinker, but never was made sick or unfit for business by liquor. He remarked that he could always memorize easily, and that a brother, now dead, had to work twice as hard as he to commit to memory. Again he was asked to repeat some verse, nursery-rhyme, or prayer, but could not.

Did you ever have the pox, and when? "I think it is in—was in Louisville, in—I forget." Who treated you? "He had a big, red moustache. Forget his name." Was it Lyle? "Yes; Dr. Lyle—Dr. Bill Lyle." How long ago? "Fourteen—in eighteen—O, I can't say it." What is your wife's name? "Her name is Kalten—her name is an Irishman—B—Batheen—Katheen—O, damn it!" Can you spell my name! "Yes; Y-a-l d-a-n. No; Yalalalal—dalal." He was conscious of his failure, and expressed vexation. Sometimes he would pronounce my name readily, and at others he could not remember it. He was asked to spell his own name. "Too muce, Ad-m—six months sitting with that one specialty with you, my business, I could feel it thousand times. And, doctor, upon my word and honor as a gentleman—have not got—I have not got enough. Been sick long time; bother me too much."

The patient by this time evincing evident mental fatigue and irritation, no more questions were asked him. Upon his forehead and legs and arms were exceedingly large, wavy, crescentic scars and stains, unmistakably syphilitic. On one shin was a considerable node, and the glands of the groins and neck were symmetrically enlarged. The diagnosis was tertiary syphilis of the brain. Scruple doses of the iodide of potash in half glass of milk every three hours when

awake, were ordered; each dose to be increased ten grains daily till iodism or relief was obtained. Within forty-eight hours improvement set in. The iodide was continued in as full doses as could be borne during the patient's stay in hospital, and he was advised to persist in its use for six or twelve months. He also got, after the first week and for a month, syrup of the hypophosphites, syrup of iodide of iron, and cod-liver oil. He was allowed the best diet to be procured. Tobacco and alcohol were totally prohibited.

On the 11th of April, 1877, two months less three days after admission, M. H. A. left the hospital and returned to his avocation of "character delineator." His *forte* is the negro character, in which he produces the songs, dances, and lingo of that peculiar people. He is the original "Old Black Joe," in which part he is quite famous. His performances since his recovery are pronounced equal to his best in his best days. It is now nearly seven months since the recovery, and no relapse of the aphasic or other symptoms has occurred.

The following history of his case was furnished me by M. H. A. shortly after his departure from hospital:

"I have been a pretty hard drinker, but never had mania a potu. Contracted syphilis in 1855, a number of chancres appearing upon penis. Under treatment sores disappeared in two weeks. In 1858 three large and very hard chancres appeared on penis and a bubo in each groin. Chancres were burned with caustic and the buboes painted with iodine and bandaged, and took internal treatment. These troubles disappeared in about four months. Two years after a very large sore came on the right leg above the ankle, which continued to grow, and penetrated to the bone. Caustic, calomel, and burnt alum were applied, and sarsaparilla and potash were taken. This sore soon healed, but within four months a number of large sores developed on the arms, legs, body, and head. Under sarsaparilla, pokeroor, potash, and a month of mercurial

vapor-baths these sores disappeared in the course of six months. During the ten subsequent years no syphilitic manifestations occurred, and his health was perfect. But at the expiration of this period a large sore broke out on the leg in the site of the first ulcer, and a similar lesion came on the neck. Potash palliated these sores for some months, when relief was sought at Hot Springs, Ark. Here he remained nine weeks, bathing daily and taking potash, mercury, etc. Health being apparently restored, he resumed his avocation in a Southern city, and so continued till the 14th of October, 1876, when after prolonged intermittent fever he "took liver-complaint," and was confined to bed. On the 20th of the month, while sitting up, he experienced an apoplectic attack, which lasted half an hour. On return to consciousness he found himself paralyzed on the entire right side. For three weeks he retained his mental faculties, when he "had a dumb spell," and from this time he remembers nothing till the 20th of February, 1877, six days after admission to the Louisville City Hospital. He does not now remember the headaches, but during his sickness he complained of intense pain in the left temple. Present condition good; mind and body active; full of energy; and weighs more than he ever did.

The questions and answers contained in this report were taken down by Mr. Hathaway, phonographer, of this city.

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A CLINICAL LECTURE ON APHASIA.

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Gentlemen: Many of you will recollect a remarkable case of syphilitic aphasia which I brought before you last winter. As I have had occasion to refer to that case already, and as you will find a full history of it in the last number of the Louisville Medical News (December 8th), I shall not incorporate it in my remarks to-day.

Aphasia means literally absence of speech. *Aphemia* has the same meaning. *Alalia* means absence of articulation. *Amnesia* means forgetfulness—absence of memory. *Asymbolia* means inability to collect words. *Agraphia* means inability to convey words or ideas by writing, and sometimes this inability exists as to all other signs made by the hand or other portions of the body. At the present day the term aphasia is adopted with a broad signification embracing all these conditions. The case I present to you now, and the brief notes of eleven other cases which I shall give you, will convey to your minds, I hope, a clear idea of this most curious, interesting, and somewhat rare manifestation of disease.

The patient before you is William Wood, an Englishman, forty-five years old, by occupation a gardener and gentleman's servant. So much we learn from letters in his possession, in which also he is spoken of as a sober, industrious, and most worthy person. He impresses one as a very intelligent and decent man, and possesses the deferential manners of an English servant. He was brought to the hospital, on the evening of November 10th, in a totally unconscious, insensible condition, with eyes wide open, pupils normal and responding readily to light. Had involuntary passages of feces and urine, and vomited, shortly after admission, a large amount of undigested food. An extensive contusion occupied the right eye and brow. At intervals of three or four minutes convulsions occurred, lasting two or three moments; the entire right side being convulsed, the left remaining intact. He was brought to the hospital from Macauley's Theater, where Mr. Booth was playing "Brutus." He uttered a peal of loud, strange laughter, and fell forward in a fit. He was immediately carried out and brought to the hospital, where he remained in a stupor during the night. After a few doses of bromide of potash the convulsions ceased, but whether this was due or not to the bromide I can not say. Next morning, November 11th, I examined him. Upon the right

side of his head, from forehead back, extended an immense scar, due to the kick of a horse he told us. In one groin was a cicatrix, and on the legs and arms were several others, small and roundish, but of non-syphilitic appearance. His right side was slightly paralyzed, and his walk was dragging and unsteady. His tongue he moved perfectly from side to side and up and down, but his speech was a trifle thick in making the labial sounds. The following questions were asked by me and replied to by him: Your name? "William Wood, sir." Your age? "Fifty years old, sir." Your occupation? "Flour-dealer, sir." Your home? "Pittsburgh, sir." Married? "Yes, sir." Name of wife? "Amelia, sir." How long in America? "Eighteen years, sir." How long married? "Eighteen years, sir." How many children? "Eighteen, sir." Age of eldest? "Eighteen years, sir." Age of second? "Eighteen years, sir." And so he went on giving eighteen years as the age of all his children and of his wife also. Have you had pox? "Yes, sir." How long since? "Eighteen years, sir." How did your sickness begin! "Had applepleptip fit, sir." His p's he gets out badly. How long since? "Twelve years ago, sir." In reply to questions, he said he belonged to the Church of England; never went to the theater; could say the creed, Lord's prayer, etc. His attempts to repeat the creed and prayer, however, were absurdly abortive, but I need not recount them. He could repeat but four or five letters of the alphabet, and his counting was no better. The efforts to think and talk seemed distressing, and the interrogations were dropped. Mislead by his answers, I ordered him iodide of potash, presuming his malady originated from syphilis. Next morning, November 12th, he was again examined. He had no recollection of the previous day, and was astonished at the statements he was told he had made. His mind was much clearer, and his paralytic symptoms had decreased. He said he could write his name, but upon taking the pencil was only able to make, W and some unmean-

ing marks. He repeated the alphabet, only omitting the letters from R to W, but could not repeat the creed or Lord's prayer. He answered that he was never married; had no children; never was a flour-dealer; never was in Pittsburgh except in passing through to Louisville in search of work as a gardener; never had syphilis. His scars came from boils. Had his first fit twelve years ago, while at work in the garden. Got the scalp-wound, which did not involve the bone, from a horse's kick after the first convulsion, so that this could not have caused the convulsion. Has had no attack since until his last one, of which he has no personal knowledge. Has no recollection of being at the theater, and never goes to the theater under any circumstances. To-day, November 13th, his intellectual condition is still further improved. The iodide of potash was discontinued after he denied the syphilis. He took but a dram of this medicine, and I am sure it was without effect. He reiterates all the statements made in yesterday's interview. He remembers many events transpiring on the 10th, the day he was at the theater, but has no recollection of going there or being there. Says he has had dumb chills for some months, and left his last situation, in the Eruptive Hospital, in Brooklyn, N. Y., upon that account, and his letters of recommendation prove this. He says that after his first fit, twelve years ago, in Canada, he was in bed three months owing to right hemiplegia, and was disabled from work two years. He is getting bromide of potash, iron and quinine, and good diet. Dr. Cornic, my excellent clinical assistant, kindly preserved the accurate notes I have given you of this case.*

CASE II.—The first case of aphasia I ever saw, or at least recognized, was in May, 1868. A friend engaged in literary pursuits called at the office for medical advice. I

*On the 20th William Wood was perfectly well, and left the hospital to look for work. I have seen him to-day, December 2d; and although completely restored to health he is still oblivious to every thing that transpired from the 10th of November, about two o'clock, up to the time he came to himself in the hospital. He can not believe he was at the theater.

asked his ailment. He replied, "I've got—I had—I've—I've—O, I can't think of the thing." A headache? "Yes, a headache." How long out of sorts? "I've been—I've—that's curious!" Three or four days? "Yes, three days." What have you taken? "I took some—I took some er some er—O, I got it from the druggist. It is a simple thing. I know it just as well! Why it's—it's—plague it, I can't call the word." Although the gentleman was a man of pure morals and blameless habits, I began to fear he had drank too much wine. So, very apologetically, I inquired; but he denied the soft impeachment. Taken any opium? "No." Hasheesh? "No." Belladonna? "No." Bromide? "No." Aconite or stramonium? "No." His tongue was coated and skin a trifle sallow. After prolonged but fruitless effort to gain any further information from the patient, he was requested to go to the apothecary, and endeavor to ascertain what medicine he had gotten. Just as he got outside the door he rushed back, his face beaming with delight, and exclaimed; "Blue mass! Ten grains of blue mass! That's it!" His tongue seemed now set free, and he explained that he had "over-worked his brain; was bilious, dyspeptic," etc. He had a masked intermittent, and a calomel purge and some quinine cured him directly.

CASE III.—During my service in the City Hospital in the fall of 1868 a young man was brought into the medical ward in an insensible condition, and the persons who brought him left no history of his case except that he had had a fit. He was emaciated and dirty, and his lower limbs were thickly dotted with ecchymatous sores about the size of your thumb-nail or smaller. Destructive ulceration of the right eye was in progress, and blindness of course followed this. His skin was cold, his pulse was feeble and irregular, and valvular disease of the heart was found to exist. On the third and fourth days he began to show some vitality, and, in addition to the milk which had been given him in small quantities, iron and bro-

mide of potash were ordered. Within a week he was sitting up and endeavored to talk. He had no paralysis of the tongue or elsewhere. He could not tell his name, or count, or repeat the alphabet, or, indeed, utter any word except "yes" and "no." He seemed to have ideas, but no memory of words. Day by day he grew stronger. His first word after "yes" and "no" was "my." A comb he called "my." A toddy he called "my." When asked his name he said "my." His ideas returned faster than his language, and when he found himself unable to produce his thoughts in words he evinced annoyance. He would attempt to write, but made only unmeaning marks. His sores did not look syphilitic, and he only got iron, bitter tonics, and the bromide. Whether from the medicine or not, he recovered his general health completely and his speech so far as to be able to leave the hospital at the end of three months. He had no knowledge of having had a convulsion. He was a printer, a native of Rochester, New York; never had syphilis, had had acute rheumatism, had been very dissipated, and had suffered from want and exposure. This account of himself he gave when he was recovered.

CASE IV.—Mr. N., a prosperous merchant, aged forty-eight, delicate, dyspeptic, nervous, and subject to sick-headaches, but an exceedingly bright, vivid business man, suffered an attack of break-bone fever on returning from a fatiguing trip in Arkansas in 1861. In two weeks he was out of doors, but excessively nervous. Frequent attacks of exquisitely painful neuralgia of the foot now came on at irregular intervals. The neuralgia gradually crept up the limb, but never got higher than the hip. In 1865 chills or chilly sensations came on and the neuralgia disappeared. He was now much annoyed by moles before his eyes, and dyspepsia, constipation, and deranged kidneys gave him great trouble, and his nervousness was most distressing. One night soon after retiring he said to his wife he would turn on his left side, thinking that would make him more com-

fortable. Almost instantly he snored loudly, as if in a profound slumber. Disturbed by the noise, his wife endeavored to get him to change his position. "Are you asleep already?" she said, shaking him. He made no reply, and she soon discovered that he was unconscious to all sounds. Medical aid was quickly summoned. For two hours he remained comatose. When the coma passed, entire paralysis of the right side was discovered. A complete silence of three months followed the apoplectic stroke. Suddenly one day he exclaimed, "Out there!" but he could not repeat the sentence, and a total silence of months followed. Gradually, however, words have come to him, till now he has quite a vocabulary; but he uses only monosyllables or very short sentences. He is a regular attendant on church, and expresses his opinion when asked as to the sermon by "Very good, sir," or "Not very good, sir." "That's a fact, sir," he uses very frequently; and when his health is inquired after he always replies, "Getting better, sir." He invariably says "No, sir" to both sexes and "Yes, ma'am" to both sexes. He can sign his name, but not write more, and can not read anything. The paralysis of his leg is perceptible in his walk, but he gets about quite rapidly. His arm and hand are as strong as ever, but both are ataxic. He has strength in them, but not the power of co-ordination. This patient was called to see in a convulsion in 1870, at which time I got from his wife the history of the case, except what I have observed from personal intercourse with the gentleman.

CASE V was furnished to me by a friend. An old Virginia gentleman, given to horse-racing, fox-hunting, high living, and free drinking, was stricken by right hemiplegia and total aphasia. After a while the paralysis diminished and his speech returned to a limited extent. His only language, however, now was oaths; and whether asking questions, extending hospitality, giving orders, or caressing his little grandchildren, his efforts at speech only produced oaths.

It is a curious fact that in many aphasics the oaths alone remain to represent ideas.

CASE VI.—A little negro race-rider, aged thirteen, was accidentally shot in the left nostril, the ball apparently going straight back. He fell, and for some moments was convulsed, then was comatose for several hours, and this was followed by delirium. During the delirium he swore terribly and almost incessantly. In a few weeks he was going about in apparent comfort, but totally deaf and very silent. After a couple of months he became entirely dumb, and at the end of six months died of what we deemed inflammation of the base of the brain.

CASE VII.—A physician a relation of mine soon after completing his medical education took typhoid fever. During convalescence he discovered to his horror that he had lost the arts of reading and writing. Fortunately both returned when his health was fully restored.

CASE VIII.—A son of this gentleman, also a physician, advanced in life, but of vigorous and unusually active mind, mentioned to me one day that he had been alarmed to find that several times lately he had been unable to think of the names of familiar streets or to call to mind the names of old friends. I soon discovered that he had a deranged stomach and general malaise from dumb chills. Quinine quickly dispelled his aphasia. Always he has been more or less given to calling one of his children or grandchildren by another's name, and when "out of sorts" he is especially prone to this aphasic symptom.

CASE IX.—A son of the last-mentioned gentleman, also a physician, has had numberless temporary flashes of aphasia, always connected with deranged stomach, from malarial poison, and always promptly dispelled by a calomel purge, bicarbonate of soda, and liberal doses of quinine. On one occasion in a medical society he rose to correct the minutes, in which he was not properly quoted. Said he, "Mr. President, I am made to say so and so," repeating what had been

ad, "when in fact I said—I said—I'm sorry to say I can't tell now what I did say. I have a temporary aphasia, to which I am subject, from dumb chills." However, in a few moments his recollection came to his rescue, and he repeated what he wished to say.

CASE X.—A bright little girl three years old, a child of the physician alluded to in Case IX, became unusually irritable, and at the same time showed a remarkable absence of mind. She would order a cup of tea from the kitchen, and before the servant returned would become impatient for it, and yet forget what it was she had ordered, and would appeal to some one to tell her what she had asked for. She also frequently forgot her own name, and could not call the names of toys and pictures with which she was perfectly familiar. Her tongue was coated, her breath bad, her sleep restless, and I discovered that she had a masked intermittent. She got well directly on quinine, and her aphasia vanished with her malaria.

CASE XI.—A young lady was thrown violently from her horse on to her head, and received a depression of the bone just back of the mastoid process on the left side of the skull. For several days the patient was comatose. Consciousness gradually returned, and in a week she recognized her medical attendant and talked to him freely, but straightway when he was gone she forgot his visit, desired to see him, and complained of his neglect of her. It is now something more than two weeks since the accident. She is going about, and remembers every thing up to the half hour before she mounted the horse. Her mother says they had a prolonged discussion as to the advisability of going on so long a jaunt as the daughter projected, so late in the day. After getting in the saddle the girth was found to be too loose, but she said she would ride on to a friend's and have it tightened. She did so, and had a merry chat of some moments with a gentleman friend while the girth was being arranged. As she started off the gentleman playfully gave her nag a cut with

a switch. The horse plunged and threw his rider, with the result mentioned. The young lady can not be made to recall any thing connected with her ride. She does not remember either conversation, the incident of the girth, or any thing about it. This case is a patient of my colleague Prof. Bodine.

CASE XII.—A young man was driving a rockaway containing his mother and sister. The horse, frightened by a vicious dog, wheeled suddenly and threw the driver out, fracturing and depressing the right parietal protuberance. For some time he was comatose, and for several months was in a semi-conscious condition. Finally he got upon his feet, but his mind was disordered; and though he conversed limitedly on ordinary topics, he could not be made to remember the drive, the rush of the dog at his horse, or the horse's panic. Three years after the accident this man came under the care of Dr. David Cummins, of this city, suffering at the time from catalepsy. The patient stood in any position in which he was placed, and held his limbs indefinitely in the posture given to them, snoring all the time.

Dr. Cummins trephined his patient, and improvement of his general condition occurred rapidly. On the fourteenth day he seemed to wake up thoroughly, and his first words were to his sister standing by. He seemed to take up the thread of his life exactly where he had left it off three years before. "Did you or mother get hurt?" said he. "And what became of the horse? Did he smash up the rockaway?" He recovered and retained his health and memory from this time.

These cases are sufficient to illustrate the various forms of aphasia, and now a few words as to its pathology and treatment.

Aphasia may be functional or organic, temporary or permanent, and in either case may vary widely in its extent.

The temporary cases are probably due to reflex irritation or to temporary cerebral congestion, and the permanent cases are due to some serious cerebral lesion.

It is commonly held, or at least widely held, that the organ of speech exists in the left side of the brain and in the posterior portion of the third frontal convolution, and certainly in most cases of severe aphasia the seat of disease seems to be located on the left side of the cerebrum, though there are not a few exceptions to this. May it not be that most persons are left-brained, but that some are right-brained as we find them right-handed and left-handed. Many physiologists deny that the function of speech is localized any where in the brain.

Dr. Austin Flint, jr., the highest American authority, and one of the highest in the world, holds to the theory of localization in the left brain.

TREATMENT.

Aphasia, like most diseases, should be treated with reference to its cause, which this can be discovered. If from malaria, dyspepsia, stimulants, over-work, syphilis, or depressed bone the course of treatment is obvious, and usually proves successful. If from a clot, effusion, softening, or tumor, or connected with diabetes or albumenuria, little may be expected from medication, though time may do much good.

If you would read the most charming account of aphasia which I have ever had the pleasure to meet with, you will find it in "Trousseau's Clinical Lectures."

LOUISVILLE.